## DISTRICT 709 FIELD TRIP REQUESTS

In accordance with School District Policy District 6160, District 709 recognizes properly planned, well conducted, and carefully supervised field trips may be a vital part of the curriculum. School field trips are encouraged within available resources and requirements outlined below.

DIRECTIONS: All staff are required to submit a Field Trip Request prior to the field trip being finalized with the involved students and to:

Receive administrative and/or extra-curricular coordinator approval for all instructional and supplementary field trips. Receive administrative reviewal and school board approval for all extended trips (Exceptions may be granted by the

DEFINITIONS:

<u>Instructional Trips</u> - Trips that take place during the school day, relate directly to a course of study, and require student participation. Fees may not be assessed against students.

school board chair to accommodate emergencies.)

<u>Supplementary Trips</u> - Trips in which students voluntarily participate in and which often take place outside the regular school day, but do not include overnight stays. Financial contributions may be requested of students.

Extended Trips Within Minnesota and Continental United States - Trips that involve one or more overnight stops within Minnesota or the Continental United States and may be instructional or supplementary and are voluntary in nature. Extended field trips require school board approval prior to the trip.

INSTRUCTIONAL TRIP ACTION Principal:	ON ☐ Approved	Name:	
·	☐ Not Approved	Date:	
SUPPLEMENTAL TRIP ACTIO	ON Approved	Name:	
Principal:	• ,		
	☐ Not Approved	Date:	
Instru	ctional/Supplemental Trips	need not be sent to District office.	
EXTENDED TRIP ACTION		Danalto & More	
Principal:	Recommended	Name: Audustion	
( Till Co.   P.   Co.   Co.	Not Recommended	Date:	
· ·		$\Omega$	
Assistant Superintendent:	Recommended	Name: Ostrzedin	
	Not Recommended	Date: 2/2/4/18	
	A	Name:	
School Board:	Approved		
	☐ Not Approved	Date:	
All extended trip proposals must be sent to the Assistant Superintendent's Office to be placed on the Education Committee meeting agenda for approval.			

## FIELD TRIP REQUEST FORM

Date of Submission:

Type of Trip:

Instructional

Supplementary

X Extended

Organization/Grade/Course Planning Trip;

2. Contact Person (Responsible for Checklist Completion):

3. Field Trip Date(s):

4. Field Trip Overview (Include events, establishments and locations):

Field Trip Departure from School (Date and Time):
 Field Trip Return to School (Date and Time):

6. Objectives of Field Trip:

7. Relationship to Curriculum or Student Learning:

8. Planned Follow-up Field Trip Activities:

Skills USA

Kevin Chederquist

March 27, March 28, and March 29, 2018

Technical Skills Competition, Doubletree, Bloomington, MN

Depart Denfeld on March 27 at 6 am, Return on March 29th at 3 pm

SkillsUSA Minnesota is recognized by business and government as the premier organization providing highly skilled leaders possessing outstanding technical, academic and employability skills. SkillsUSA Minnesota creates opportunities for students, educators and business. This is accomplished through leadership training, volunteerism opportunities, competitions and conferences, which enhance students' self-worth and employability skills to create a seamless transition into the workforce. Through competition, students will be able to meet some of these objectives.

Through leaderships and technical competition we work with students in the career and technical education programs to continue to receive skills and connect classroom to business.

Possible National Competition

Estimated Expenses (This is total budget for all participants)			
Total Admission/Fees; (Six students and one adult)	900		
Total Meals	300		
Total Lodging:	600		
Total Transportation	175		
School District Vehicle(s)			
Commercial Transportation Carrier			
Private Vehicle (requires certificate of insurance)			
Total Additional Stipends: (Sub Costs)	432		
Other: HOSA Membership , subs	0		
Total	2407		

Revenues			
District Budget	01-380-005-428-000	832	
Booster Group		0.	
Donations		.0	
Student Fees		1575	
Total Additional Stipends:		0	
Total		2407	

## FIELD TRIP REQUEST CHECKLIST - All Field Trips DIRECTIONS: Please complete checklist. No attachments are necessary.

	The second of th
	Develop and Communicate Student Discipline Expectations
	Forward Field Trip Explanation and Fee Structure Letter Sent to Parents/Guardians
	Collect Parent/Guardian Permission for Student Participation in Field Trip (Include request for special information - i.e. allergies,
·	medications, special needs.)
回	Gain Access to Cell Phone for Field Trip
المحد	Plan Arrangements for Early Pick-Up or Late Drop-Off Students (if necessary).
	Guide: May choose to leave message on school voice mail to help with late drop off.
٠	Reminder: Notify food service of non-participation.
口	Plan Administration of Student Medication and First Aid Needs (if necessary)
	Guide: Contact School Nurse.
	Develop and Communicate Action Plan if Student Gets Lost on Trip
国	A many A High Changengas for Field Trin (if noonegan)
	Guide: One (1) adult for every twenty (20) students depending on field trip. Parent volunteers are encouraged when possible of
	appropriate.
W	Develop and Communicate Teacher and Adult Chaperone Expectations
	Example: Supervision duties, no smoking, no alcohol
$\Box$	Planned Itinerary
Santa Contract	Flatified full-stary
	TIME LOCATION
	Maintain Student Roster and Check-in/Check-out Procedure
	Arrangement for Safety Needs (i.e. crossing guards)
	(1)
Siar	nature of Contact Person:
5	
	FIELD TRIP REQUEST CHECKLIST - Extended Trip Only
	DIRECTIONS: Please complete checklist and attach all appropriate materials.
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A	Develop and Complete Field Trip Itinerary and Emergency Telephone Contacts Letter to Parents/Guardians
	Note: Attach tentative planned itinerary.
	Arrange Funding of Expenses During Trip
Œ	Arrange Meal Plans
又	Arrange Lodging Plans and Room Assignments
×	Collect Family Emergency Information for Students
77	Example: Home phone numbers, emergency contacts, medical information
$\nabla$	Additional Information
	Note: Provide any additional information.
Sia	nature of Contact Person:
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